



11-04-04

1647

PTO/SB/22 (10-04)

Approved for use through 7/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2005 (fees effective on or after October 1, 2004)		Docket Number (Optional) 61033CON (50927)
Application Number	10/003,674-Conf. #8781	Filed October 23, 2001
For SPECIFIC ANTAGONISTS FOR GLUCOSE-DEPENDENT INSULINOTROPIC POLYPEPTIDE (GIP)		
Art Unit 1647	Examiner	D. S. Romeo

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):

	Fee	Small Entity Fee	
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$110.00	\$55.00	\$
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$430.00	\$215.00	\$
<input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$980.00	\$490.00	\$ 490.00
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1,530.00	\$765.00	\$
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2,080.00	\$1,040.00	\$

Applicant claims small entity status. See 37 CFR 1.27.

A check in the amount of the fee is enclosed.

Payment by credit card. Form PTO-2038 is attached.

The Director has already been authorized to charge fees in this application to a Deposit Account.

The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 04-1105. I have enclosed a duplicate copy of this sheet.

I am the applicant/inventor.
 assignee of record of the entire interest. See 37 CFR 3.71.
 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
 attorney or agent of record. Registration Number _____
 attorney or agent under 37 CFR 1.34(a).
 Registration number if acting under 37 CFR 1.34(a) 33,928
Barbara S. Kitchell
 Signature
Barbara S. Kitchell
 Typed or printed name
(203) 353-6848
 Telephone Number

November 3, 2004

Date

(203) 353-6848

Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

Total of 1 forms are submitted.

EV307814436US

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV307814436US, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: November 3, 2004

Signature D. S. Romeo (D. S. Romeo)



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FEE TRANSMITTAL for FY 2005

Effective 10/01/2004. Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 490.00)

Complete If Known	
Application Number	10/003,674-Conf. #8781
Filing Date	October 23, 2001
First Named Inventor	M. Michael Wolfe
Examiner Name	David S. Romeo
Art Unit	1647
Attorney Docket No.	61033CON (50927)

METHOD OF PAYMENT (check all that apply)
 Check Credit Card Money Order Other None

 Deposit Account:

Deposit Account Number **04-1105**

Deposit Account Name **Edwards & Angell, LLP**

The Director is authorized to: (check all that apply)

Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) or any underpayment of fee(s)
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)
1051	130	2051	65
1052	50	2052	25
1053	130	1053	130
1812	2,520	1812	2,520
1804	920*	1804	920*
1805	1,840*	1805	1,840*
1251	110	2251	55
1252	430	2252	215
1253	980	2253	490
1254	1,530	2254	765
1255	2,080	2255	1,040
1401	340	2401	170
1402	340	2402	170
1403	300	2403	150
1451	1,510	1451	1,510
1452	110	2452	55
1453	1,370	2453	685
1501	1,370	2501	685
1502	490	2502	245
1503	660	2503	330
1460	130	1460	130
1807	50	1807	50
1806	180	1806	180
8021	40	8021	40
1809	790	2809	395
1810	790	2810	395
1801	790	2801	395
1802	900	1802	900
Other fee (specify)			

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ 490.00)

**or number previously paid, if greater; For Reissues, see above

SUBMITTED BY				(Complete if applicable)	
Name (Print/Type)	Barbara S. Kitchell	Registration No. (Attorney/Agent)	33,928	Telephone	(203) 353-6848
Signature				Date	November 3, 2004

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV307814436US, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: November 3, 2004

Signature: (Lori Giuffrida)